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#### MAIL TO:

Registry of Charitable Trusts P.O. Box 903447 Sacramento, CA 94203-4470 Telephone: (916) 445-2021

#### WEB SITE ADDRESS:

http://ag.ca.gov/charities/

ANNUAL 2017
REGISTRATION RENEWAL FEE REPORT
TO ATTORNEY GENERAL OF CALIFORNIA

Sections 12586 and 12587, California Government Code 11 Cal. Code Regs. sections 301-307, 311 and 312

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filling penalties as defined in Government Code section 12586.1. IRS extensions will be honored.

					Atterno	RECE	VED
State Charity Registration Number			Check if: Change of address		J.	<del>y Gene</del> Nata	VED Prai's Office 2018
STANFORD SETTLEMENT INC.					2000	"' ' ' ' ' '	2018
Name of Organization 450 WEST EL CAMINO AVE			⊔ Am	ended report **	registry o	Charit	abla
Address (Number and Street) SACRAMENTO CA 958154 3.3			Corporate or Organization No.		Registry of Charitable		- In st
City or Town, State and ZIP Code				Federal Employer I.D. No. 94 ~ 15		0842	
ANNUAL		ON RENEWAL FEE SCHEDULE (11 Cal. C Check Payable to Attorney General's Regis	•		311 and 312	)	
Gross Annual Revenue Fee Gross Annual Revenue Fee Gross Annual Revenue							Fee
Less than \$25,000 0 Between \$100,001 and \$250,000 \$50 Between \$1,000,001 and \$250,000 \$75 Between \$10,000,001 and \$100,000				,001 and \$50		\$150 \$225 \$300	
PART A - ACTIVITIES							
<u>-</u>	-	period (beginning 07/01/16 endin					
		72,132 Total assets \$ 2,3					
PART B - STATEMENTS	REGARDII	NG ORGANIZATION DURING THE	PERIO	OF THIS REPO	DRT		
-	-	estions below, you must attach a separate ructions for information required.	e sheet pr	oviding an explana	tion and det	ails for e	ach "yes"
•						Yes	No
During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof either directly or with an entity in which any such officer, director or trustee had any financial interest?							x
During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable prop. or funds?							х
During this reporting period, did non-program expenditures exceed 50% of gross revenues?							х
During this reporting period, were any organization funds used to pay any penalty, fine or judgment? If you filed a Form 4720 with the Internal Revenue Service, attach a copy.							х
5. During this reporting period, were the services of a commercial fundraiser or fundraising counsel for charitable purposes used? If "yes," provide an attachment listing the name, address, and telephone number of the service provider.							х
6. During this reporting period, did the organization receive any governmental funding? If so, provide an attachment listing the name of the agency, mailing address, contact person, and telephone number.						X	
<ol> <li>During this reporting period, did the number of raffles and the date(s) th</li> </ol>	•	d a raffle for charitable purposes? If "yes," provide an attach	ment indicatir		STMT 2	Х	
8. Does the organization conduct a vehicle donation program? If "yes," provide an attachment indicating whether the program is operated by the charity or whether the organization contracts with a commercial fundraiser for charitable purposes.							х
Did your organization have prepared an audited financial statement in accordance with generally accepted accounting principles for this reporting period?						X	
Organization's area code and tele	ephone numb	per_916-927-1303					
Organization's e-mail address	SISTER	JEANNE@STANFORDSETTLEM	ENT.O	RG			
I declare under penalty of perju	ury that I hav	e examined this report, including accomp	anying do	ocuments, and to th	e best of my	knowle	dge and
belief, it is true, correct and co	· \ /	Sister jeanne felion	***	.ABGliniting viesum	OB /	×1/9	lix
Signature of authorized of		Printed Name	<u></u>	XECUTIVE DIRECT	OR /	<u>~ / / 3</u> Da	te
					d175		

#15 553706 RRF-1 (3-05)

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## STANFORD STANFORD SETTLEMENT INC.

**California Statements** 

FYE: 6/30/2017

94-1550842

### Statement 1 - Form RRF-1, Part B, Line 6 - Governmental Funding

### Description

County of Sacramento DHHS 7001-A East Parkway Sacramento, CA 95823

CITY OF SACRAMENTO ANN LAND-BERTHA HENSCHEL TRUST 915 I STREET, 4TH FLOOR SACRAMENTO, CA 95814

COUNTY BOARD OF SUPERVISORS 700 H STREET SUITE 2450 SACRAMENTO, CA 95814

## Statement 2 - Form RRF-1, Part B, Line 7 - Raffle for Charitable Purposes

### Description

THE ORGANIZATION HELD TWO RAFFLES DURING THE YEAR AND FILED THE NECESSARY PAPERWORK WITH THE CALIFORNIA DEPARTMENT OF JUSTICE.



# STANFORD SETTLEMENT NEIGHBORHOOD CENTER

450 West El Camino Avenue 

Sacramento, CA 95833
916-927-1303 office 

916-922-1694 fax

www.stanfordsettlement.org

March 16, 2018

RECEIVED
Attorney General's Office

Registry of Charitable Trusts State of California, Department of Justice PO Box 903447 Sacramento, CA 94203-4470 MAR 2 0 2018

Registry of Charitable Trusts

RE: NOTICE OF INCOMPLETE REPORT CT FILE NUMBER: 018529

To Whom It May Concern:

As per your letter dated March 14, 2018 (attached), the following are the dates of Stanford Settlement, Inc. raffles for the fiscal year ending 6/30/2017:

**September 24, 2016** 

Pister Jame Jelia

June 21, 2017

Sincerely,

Sister Jeanne Felion, SSS

**Executive Director** 

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